

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND

h.d.

2008 FEB 22 PM 3:22

COMMITTEE NAME (Must be same as on Statement of Organization)

Iowans for Bob Dopf

IMPORTANT: Indicate by # type of committee you are reporting for: -1-

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Robert C. Dopf

Political Party (if applicable)

Republican

Office Sought

Secretary of State

District (if Senate or House)

FORM

DR-2

(Rev. 07/2007)

**DISCLOSURE
REPORT**

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

5127

WPS

2-25-08

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Robert C. Dopf
SIGNATURE OF PERSON FILING REPORT

(515) 276-4959
TELEPHONE

Feb. 22, 2008
DATE SIGNED

I AM FILING A January 19, 2008 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 117.39

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 217.39

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

212.50

4.89

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 0.00

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 10,683.05

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 0.00

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

___ YES ___ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ -0-

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Iowans for Bob Dopf

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/31/07	ID# CK#	Wells Fargo Bank 84th & Douglas Ave. Des Moines, IA.	Accumulated Bank Service Charges Jan. 2007 to July, 2007 (7) months @ \$5.30 per month	\$ 37.10
5/16/07	ID# CK#	Competitive Edge 3500 - 109th St. Des Moines, IA. 50322	Campaign posters	100.00
7/31/07	ID# CK#	Competitive Edge 3500 - 109th St. Des Moines, IA. 50322	Campaign posters	75.40
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 212.50

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Iowans for Bob Dopf

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
1/1/08	Robert C. Dopf 7112 Holcomb Ave. Des Moines, IA. 50322	Self	Loan Forgiven	\$ 8,195.11	<input type="checkbox"/>
1/1/08	Robert C. Dopf 7112 Holcomb Ave. Des Moines, IA. 50322	Self	Incurring debt forgiven	2,487.94	<input type="checkbox"/>
	The incurred debt is Carried forward from the Jan. 19, 2007 report minus the Competitive Edge debt that was repaid.				<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

* copies; office supplies; postage; signs;
printing, and milage

+ the Concept Works 350.00 (not clear if
he can repaid + debt then owed to him - assume so)

SUB-TOTAL

\$

TOTAL (if last
page of this
schedule)

\$

10,683.05

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

RESET**COMMITTEE NAME** (Must be same as on Statement of Organization)

Iowans for Bob Dopf

SCHEDULE

F

(Rev. 02/08)

**LOANS
RECEIVED
& REPAYED**☐ **CHECK THIS BOX IF
AMENDING FORM****NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$** 8,100**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
5/16/07	Robert C. Dopf 7112 Holcomb Ave. Des Moines, IA. 50322	Self	\$ 100.00

TOTAL (PART I) \$ 100.00**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
8/22/07	Robert C. Dopf 7112 Holcomb Ave. Des Moines, IA. 50322	Self	\$ 4.89
	The repayment shown represents the balance on the campaign committee checking account when it was closed.		

TOTAL CASH REPAYMENTS (PART II) \$ 4.89From Schedule E - TOTAL LOANS FORGIVEN \$ 8195.11**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ -0-

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

FORM	(Rev. 07/03)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	5127
Indexed	
Audited	
Computer	WRS + db
Certified Date of Dissolution	

Notice of Dissolution

Mail to:
IECDB
510 East 12th, Suite 1A
Des Moines, Iowa 50319

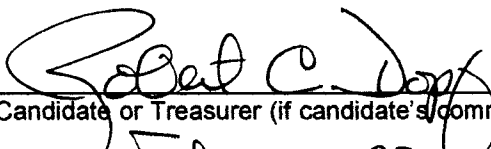
Iowans for Bob Dopf
Official Name of Committee
7112 Holcomb Ave.
Street
Des Moines, IA. 50322
City, State, Zip Code
(515) 276-4959
Area Code Telephone

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.



Signature of Candidate or Treasurer (if candidate's/committee)/Signature of Chair or Treasurer (if PAC)

February 22, 2008

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.